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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/719,629 TITLE OF INVENTION	11/21/2003 I: OXIDATION BARRII	ER COATINGS FOR SIL	Derek Raybould JICON BASED CERAMI	CS	Н0003891-1170	3479
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV, PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	12/04/2007
EXAM	IINER	ART UNIT	CLASS-SUBCLASS	7		
MILLER, DANIEL H		1775	428-408000	_		
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON PLEASE NOTE: Unless an assignce is identified below, no assigne			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) data will appear on the patent. If an assignce is identified below, the document has been filed for			
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Honeywell International, Inc. Morristown, NJ						
noneywell international, inc. Fiorlistown, No						
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent):	Individual XXCo	rporation or other private gro	oup entity Government
4a. The following fee(s) are submitted: Issue Fee						
	is SMALL ENTITY statu		☐ b. Applicant is no los	nger claiming SMAL	L ENTITY status. See 37 CF	FR 1.27(g)(2).
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Authorized Signature	/PAUL D. AME	ROZOWICZ/		Date Dec	ember 3, 2007	
Typed or printed name Paul D. Amrozowicz			Registration No. 45,264			
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